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Bib Data Sheet

CONFIRMATION NO. 6234

SERIAL NUMBER 10/705,590	FILING DATE 11/10/2003 RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. 141621-1
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APPLICANTS

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** CONTINUING DATA *****

  None

** FOREIGN APPLICATIONS *****

  None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/13/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 4	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature  Initials				

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TITLE

Formable sheets for medical applications and methods of manufacture thereof

FILING FEE RECEIVED 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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